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NAME) OFFICE OF LEGAL CONSEL (Street Address or Route Number)	(NAME) (Street Address or Route Number)	Thomas T. Michlowski, M.D. (NAME) 512 Sunnie Land
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Vote Record

Senate Committee on Insurance, Tourism, Transportation and Corrections

Date: Moved by:	Corob-	Seconded by: Clearinghouse Rule: Appointment:		Zien	7.42		
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Motion Carried	Motion Failed	

Testimony of Ted Garlewski, Ph.D. Psychological Services Coordinator Department of Corrections Senate Bill 314

Senate Committee on Insurance, Tourism, Transportation and Corrections March 1, 2000

The Department of Corrections is in full support of Senate Bill 314. Extending the involuntary civil commitment period for inmates from the current 180-day time limit (within 365 days) to one year will be of benefit to all involved in the process.

It will benefit the inmate, first and foremost, as it will allow sufficient time to make a diagnosis and determine the appropriate course of treatment. These initial steps may alone account for a six month period. The mentally ill inmate will also benefit from the continuity of care that would be possible. This means that once treatment is initiated, it would continue without interruption by some artificial time limit and the individual can receive the full benefit of that treatment.

Continuous treatment is also more humane since 1) repeatedly relapsing into a state of mental instability may be terrifying to the person and could instill a sense of hopelessness and 2) it may give the inmate the opportunity to experience a stable, realistic way of relating to others and the environment as well as facilitate reintegration into society. This would eliminate the current cycle of partial treatment and relapse, which is inherently counterproductive to the stated goals and may hinder treatment recovery in the future.

Senate Bill 314 would additionally be of benefit to staff of the Department of Corrections. It takes quite a bit of effort on the part of medical, clinical and corrections staff to manage a seriously mentally ill inmate who refuses to participate in necessary treatment. To go through the process of transferring the inmate, obtaining the required court order, initiating treatment, observing some progress and then having treatment terminated prematurely can be very discouraging.

Thank you for allowing me to testify and I would be happy to answer any questions.

Senate Bill 314

Committee on Insurance, Tourism, Transportation and Corrections

Good morning. My name is Kris Timm, Acting Director of the Wisconsin Resource Center in the Department of Health and Family Services. With me today from the Wisconsin Resource Center are Dr. Thomas Michlowski, our Medical Director and Robert Wegener, our Director of Nursing. Paul Harris is from the Department's Office of Legal Counsel.

Mentally ill inmates at the Wisconsin Resource Center take medication for their mental illness in three different ways:

- 1. Voluntarily
- 2. Civilly committed under 51.20(1)(a)
- 3. Committed under 51.20(1)(ar) under the alternative standard where dangerousness to self or others does not have to be shown

Under current law, an inmate may be committed by an alternative petition under s.51.20(1)(ar). This section of the Chapter 51 statute is intended for those inmates who do not meet the civil commitment standard of dangerousness to self or others but whose mental illness is in need of treatment. The current statute permits qualified inmates to be committed for treatment for no more than 180 days out of each calendar year. Senate Bill 314 extends the time period to one year for which an inmate may be committed when it is determined there is a continuing need for treatment. The Wisconsin Resource Center (WRC) utilizes

the alternative petition allowed by the statute for a very small number of their mentally ill inmates.

The Wisconsin Resource Center is a medium security prison administered by the Department of Health and Family Services. It was created by the Legislature in 1983 to serve mentally ill inmates transferred from DOC institutions for care and treatment at the WRC. Once an inmate has been successfully treated by the WRC, he is returned to a DOC institution.

WRC currently has 225 inmates. Approximately seventy percent of WRC's inmate population take medication for their mental illness, the majority of them on a voluntarily basis. During 1999, thirty-three inmates were civilly committed to WRC under s.51.20(1)(a), thirty of which are committed under s.51.20(1)(a) and three committed under s.51.20(1)(ar). From January 1999 through December 1999, less than 10% of the inmates committed to the WRC for treatment of their mental illness are under s.51.20(1)(ar).

While those inmates who are civilly committed under s.51.20(1)(a) may be treated on an uninterrupted basis if they continue to meet the statutory definition for civil commitment, those committed under the alternative petition must have their treatment discontinued after six months. Treatment may not be initiated again until the following year, regardless of their continuing need.

During that period when they cannot be treated, they typically become psychotic and their level of cognitive functioning declines. Their psychosis is exhibited by disruptive behavior that makes it impossible to allow them out of their cells and at the same time maintain a therapeutic environment for the other inmates on the treatment unit. Discontinuing psychotropic medication periodically can have long term adverse effects. Continuous treatment slows or prevents the individual from regressing to a lower functioning state.

SB314 will help prevent this very small population of inmates in need of treatment from regressing further and becoming even more mentally ill. It will allow those individuals who do not meet the dangerousness standard prescribed by Chapter 51, but nevertheless are in need of treatment, to be cared for appropriately. It will break the continual cycle of treatment, psychosis and deterioration. It may shorten their length of stay at the Wisconsin Resource Center, thus making room for other DOC mentally ill inmates to be treated. The Department urges passage of this bill.